<i>-</i>	Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information un PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10648346		
		CLAIMS'A	olumn 1)		Column 2)	SMALL ENTITY		OR	OTHER T OR SMALL EN	
	FOR	NUM	BER FILE) NUM	BER EXTRA	RATE	FEE	7	RATE	
	SIC FEE CFR 1.16(a))		•				\$	1	TOATE	F
ro	TAL CLAIMS CFR 1.16(c))		minus 2	20 - 1			-	OR		┤ ;==
ND	EPENDENT CLA	IMS				X \$=	 	OR	× \$=	
37	CFR 1.16(b))	<u></u>	minus	3 = .		X \$=	 	OR	X \$=	ļ
MUI	ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$=	ļ	OR	+ \$=	
lf t	If the difference in column 1 is less than zero, enter				n 2.	TOTAL		OR	TOTAL	
	, '."' C	LAIMS AS AM	iENDEI) – PART II				_		
	J		icitoco					25	OTHE	R THAL
		(Column 1)	٠.,	(Column 2) (Column 3)		SMALL ENTITY		OR •	OTHER THAN SMALL ENTIT	
TA		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	AD
II.	Total	AMENDMENT	14:	PAID FOR			FEE			TIO FI
2	Total (37 CFR 1.16(c))		Minus	<u> </u>	=	=		OR	x s =	
AMENDMENT	Independent (37 CFR 1.16(b))		Minus	***	=	=		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		OR	+ 5 =	
_,		· · · · · · · · · · · · · · · · · · ·		V	··· ····	TOTAL ADD'L FEE	:	OR	TOTAL	<u> </u>
		·		10.1		AUULFEE] 011	ADD'L FEE	
T		(Column 1) CLAIMS	Γ	(Column 2) HIGHEST	(Column 3)			}		T
AMENDMENT B	3.2.05	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	AD TIOI FE
	Total (37 CFR 1.16(c))	24	Minus	"24	=	x \$ =		OR	X § =	
	Independent (37 CFR 1.16(b))	5	Minus	5	=	x \$ =			x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							OR		
						+ \$ = TOTAL		OR	+ \$ = TOTAL	
				÷ • •		ADD'L FEE		OR	ADD'L FEE	L
		(Column 1)		(Column 2)	(Column 3)	·				
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	AD TIOI FE
Ĭ	Total (37 CFR 1.16(c))	•	Minus	••	=	x \$ =		OR	x 5. =	
	Independent (37 CFR 1.16(b))	•	Minus	•••	=	x \$ =				
┋┝		ATION OF MULTIPLE	DEDENIO	SNT CLAIM 127 CF	E 1 16(d))			OR		
1	FINOI PRESENTA	THOR OF MULTIPLE	DEPENDE	INT CLAIM (37 CF	rs 1.10(d))	+ \$ = TOTAL		OR	+ § =	
						ADD'L FEE		OR	ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.